

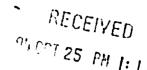
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## COUNCIL COMMUNICATION

MEETING DATE: PREPARED BY:	November 2, 19					
PREPARED BY:		November 2, 1994				
	City Clerk					
RECOMMENDED A	ACTION: No a	action - information only.				
BACKGROUND INFORMATION:		Copies of applications for Alcoholic Beverage Control License have been received from the State of California Department of Alcoholic Beverage Control for the following:				
	J. Boyd, Lakewo on Transfer	od U-Save Liquor, 215 Lakewood Mall, Off Sale General, Person to				
215 Lakewood Mal Alcoholic Beverage		commercial Shopping. This is an appropriate zoning for this type of				
FUNDING:	None required.					
		Jennifer M. Perrin Lity Clerk				
JMP						

THOMAS A PETERSON City Manager





## APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)/ $\xi_1, \xi_2, \xi_3$

TO: Department of Alcoholic Beverage Control 31 East Channel Street, Room 168

P.O. Drawer 150 Stockton, CA 95201

(209) 948-7739

DISTRICT SERVING LOCATION:

Name of Business: Location of Business:

Number and Street City, State Zip Code

County

Is premise inside city limits?

Mailing Address:

(If different from premise address)

If premise licensed: Type of license

Transferor's names/license:

File Number......301809 Receipt Number.....1007469 Geographical Code.....3902

Copies Mailed Date 10-24-94

Issued Date

**STOCKTON** 

215 LAKEWOOD MALL

LODI CA 95242 SAN JOAQUIN

2306 FAIRFIELD AVE

BOYD TERRIE J 294785

FAIRFIELD CA 94533

Licens	e Type	Transaction Type	Fee Type	Master	Rup	Date	Fee
1. 21	OFF-SALE GENERAL	PERSON TO PERSON TRANS	NA	YES	0	OCT 24,1994	\$1274.00 :
2. 21	OFF-SALE GENERAL	RENEWAL FEE	NA	YES	0	OCT 24,1994	\$446.00 :
3. NA	NO LICENSE TYPE	STATE FINGERPRINTS	NA	YES	0	OCT 24,1994	\$117.00 :
						TOTAL	\$1837.00

Have you ever been convicted of a felony? NO Have you ever violated any provisions of the Alcoholic Beverage Control Control Act, or regulations of the department pertaining to the Act? NO

Explain any "Yes" answer to the above questions on an attachment which shall be deemed part of this application

Applicant agrees (a) that any manager employed in on-sale licensed premise will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

## STATE OF CALIFORNIA

County of SAN JOAQUIN

Date OCT 24,1994

STATE OF CALIFORNIA COUNTY OF SAIN JUAUUTY Date OCT 245,1774
Under penalty of perjury, each person whose signature appears below, certifies and says. (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this applicant on its behalf. (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicants business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filled with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor, (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Applicant Name(s)

Applicant Signature(s)

SINGH MOHINDER	Mohinder Pel Sunto	
ZENDA HARBHAJAN	Harshugan 5. Zonde	
ZENDA SEWA	Sevie K. Zavon	

CORRECTED ABC-227 TO FOLLOW

LICENSE ACTION REQUEST	STATE OF CALIFOR
THOMAS & TERRIE BOYD	2. APC LICENSE NUMBER 21- 294785
3. OBA LAKEWOOD U-SAVE LIQUOR	4 DISTRICT OFFICE STOCKTON
PREMISES ADDRESS CITY AND ZIP 1924 LAKEWOOD MALL LODI CA. 95242	6. LICENSE ATTACHED YES PNO
A. APPLICATION TO TRANSFER LICENSE	
7. Transfer to: HARBHAJAN S. ZENDA; SEWA KAUR ZENDA	· MOHINDER PAL SINGH
Inder penalty of perjury, each person whose signature appears below: certifies and says: (1) He is the licensee, opplication, duly authorized to make this transfer application on its behalf. (2) that he hereby makes application aims to the applicant and/or location lidicated on the upper portion of this application form, if such transfer is a lost made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety days preceding or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor, (increase with no resulting liability to the Department.	io surrender all inseress in the attached licenseis) described below and to tra opproved by the Director. (3) that the transfer application or proposed trail the day on which the transfer application is filed with the Department or in
Name(s) of Licensee(s) Signature(s) of Licensee(s) Name(s) of	Licensee(s) Signature(s) of Licensee(s)
1 Horn	15 T. Box ( ) Tel
Seun K. Zanda / e less	ieTBoud County
CINCH MONINGER PAL MOGENTURED TO	3
B. CANCELLATION   Immediately   Upon Issuance   Oths	or:
I voluntarily cancel my license because I am no longer in business, or reinstated.	
B. DATE CLOSED 9. SIGNATURE	10 DATE 11. HOME TELEPHONE NUMB
X	( )
(b) If the transferor does not intend to resume operation of the licensed business and does not require hold the license under the provisions of Rule 65. The effective date of Rule 65 surrender will be	the date of application, denial, or withdrawal.
C. SURRENDER - Rule 65 Immediately I Upon Issuance voluntarily surrender my license for a period of not more than one year. I intend understand that the license must be renewed at the time renewal fees are due or the hat the Department will proceed to automatically cancel my license at the expiration	to Transfer Reactivate the license. license will be automatically revoked. I further underst
2 DATE CLOSED 13 SIGNATURE	14. DATE 15. HOME TELEPHONE NUMBE
6 MAILING ADDRESS	
FOR DEPARTMENT USE ONLY Premises Abandoned Letter Attached Requ	
D. REQUEST FOR SURRENDER OF RETAIL LICENSE IN JUNEAU SECTION 24045.5(b) OF THE ALCOHOLIC BEVERAGE CONTROL	FOR TEMPORARY PERMIT
17 TRANSFEREE 18 SURRENDER DATE	19. EFFECTIVE DATE 20. EXPIRATION DATE
21. TRANSFEROR'S SIGNATURE	22 DATE
X	
E. REQUEST FOR SURRENDER OF PRIVILEGES ON A UNDER RULE 53.	PORTION OF THE PREMISES
I/we hereby surrender the privileges or my/our alcoholic beverage license in	banquet room, dining room, etc.
	etween the hours of and
23. I/We have read the foregoing and know the contents thereof. 24 TEL	EPHONE NUMBER 29 DATE
SIGNATURE V	)

26 MAILING ADDRESS